

West Virginia State Fire Marshal's Office Regulatory & Licensing Division

Reciprocity Application Electrical Licensure

WV State Fire Marshal 1207 Quarrier Street 2nd Floor - Licensing Charleston, WV 25301 Phone: (304) 558-2191

Updated 09/2019

West Virginia State Fire Marshal's Office 1207 Quarrier St, 2nd Floor Licensing, Charleston, WV 25301

- 1. Requirements and Instructions for Electrical Licensure based on Reciprocity:
 - You must be at least 18 years of age.
 - You MUST NOT have previously held a West Virginia Electrician license that EXPIRED.
 - West Virginia must have an official reciprocity agreement with the state where you currently hold a licensed. Current agreements are as follows:
 - West Virginia Labor Division Electrical Contractor's License
 - North Carolina Unlimited Contractor's License
 - Virginia Journeyman or Master Electrician License
 - Maryland Master Electrician License (Must have passed the Statewide Test)
 - Ohio Electrical Contractor's License
 - Kentucky Journeyman or Master Electrician License
 - You must currently be licensed by examination in the state from which you are applying, and you must submit a "Letter of Good Standing" from the testing agency or licensing board from that state clearly indicating the type of exam taken, date of the exam and final score. You may contact the following agencies to obtain your Letter of Good Standing:
 - West Virginia Division of Labor
 - North Carolina State Board of Examiners of Electrical Contractors
 - Virginia Department of Professional and Occupation Regulation
 - Maryland Department of Labor, Licensing, and Regulation
 - Ohio Department of Commerce
 - Kentucky Public Protection Cabinet, Dept. of Housing, Building, and Construction
 - You must meet the West Virginia minimum work qualifications for electrical licensure
 - Master: 5 years (60months) or **10,000** hrs. of hands-on electrical work experience in industrial, residential, and commercial work settings. You must indicate having worked in all three settings in order to qualify.
 - **Journeyman**: 4 years (48 months) or **8,000** hrs. of hands-on electrical work experience.
 - You <u>must</u> complete the application for licensure <u>legibly</u> and in ink and submit it along with the \$50.00 license fee via <u>Check or Money Order made payable to WVSFMO</u>. Incomplete or illegible applications, or applications submitted without the proper documentation or payment will be returned to the applicant without review. <u>NO CASH PAYMENT</u>
 - Your social security number will be used for identification purposes at our agency only and will not be published at any time.
- If your application is submitted with all required documentation and fees, you will receive your West Virginia Electrical License card in the mail within 15 days of receipt of your application in our office or you will receive your application and fees back with a rejection letter. Please do not submit the first two pages with your application. For questions regarding this application form, please call 304-558-2191.



| | Office Use Only | | | | |
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| Α | Approved On: | | | | |
| В | By: | Typed: | | | |
| L | icense. Number: | | | | |

Application for West Virginia Electrical License through Reciprocity

Be sure to complete all sections of this application in print and legible.

| Applicant Personal Information - please complete all fields | | | | | | | | | |
|---|-------|-----------|-----------------|-------------------------|------|----------------------|--------|--|--|
| Name (Last, First, M Int) | | | | | | | | | |
| Mailing Address | | | | | | | · | | |
| Home Phone | | | Alternate Phone | | | | | | |
| Valid Email Address | | | Best way to o | Best way to contact you | | | | | |
| Employer | | | Work Phon | Work Phone | | | | | |
| Last 4 SS# | XXX- | XX- | Date of Birth | | | | | | |
| 2. Licensure Information (Please complete for each State that you are licensed in and provide proof of exam) | | | | | | | | | |
| License Type | State | License # | Exam Date | License Exp | Date | Date Disciplinary Ac | | | |
| | | | | | | У | res no | | |
| | | | | | | У | res no | | |
| | | | | | | у | es no | | |
| 3. Personal History (If you answer any of these questions with yes, please explain on a separate piece of paper) | | | | | | | | | |
| Have you ever held an electrical license in West Virginia before? | | | | | | ⊐ yes | □ no | | |
| Have you ever been denied an electrical license in any other state? | | | | | | | □ no | | |
| Have you ever had an electrical license revoked or suspended in any other state? | | | | | | | □ no | | |
| Have you ever been disciplined in any state for improper electrical work? | | | | | | | □ no | | |
| Are you currently under investigation or under indictment by any professional licensing agency in West Virginia or any other state? | | | | | | | □ no | | |

| 4. Work Experience (Please only complete this part only for any electrical work experience you have) | | | | | | |
|--|--|--|---|--|--|--|
| Name of Employer | | | | | | |
| Employer Address | | Phone | e | | | |
| Dates of Employment | | Total number o | f months employed | | | |
| Detail Description of Work Performed | | | | | | |
| Work Setting | O Industrial | O Commercial | O Residential | | | |
| Name of Employer | | | | | | |
| Employer Address | | Phone | e | | | |
| Dates of Employment | | Total number o | Total number of months employed | | | |
| Detail Description of Work Performed | | | | | | |
| Work Setting | O Industrial | O Commercial | O Residential | | | |
| Name of Employer | | | | | | |
| Employer Address | | Phone | e | | | |
| Dates of Employment | | Total number o | f months employed | | | |
| Detail Description of Work Performed | | | | | | |
| Work Setting | O Industrial | O Commercial | O Residential | | | |
| application is true and corre license and may be subject t permission to the Office of T | personally have completed this ct. I am aware that any false st to criminal proceedings in acc The West Virginia State Fire Ma rmation provided by the appli | atements made herein may ordance with West Virginia : arshal to contact any employ | result in revocation of my State Code. I hereby give | | | |
| Signature | | | Date | | | |

Mail completed application along with your **Letter of Good Standing** and

the license fee of \$50.00 payable via check or money order made out to WVSFMO to the below address:

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